

**Sweet Science Stronger Communities Boxing 2020/21**

**Booking Form**

Participant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the school/college/PRU: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s/Guardian’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s/Parent’s/Guardian’s Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s/Parent’s/Guardian’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We are able to offer 5 weeks of free activities during the period between 11th January and 14th February 2021. Activities are available for groups as well as 1 to 1 mentoring.

Please indicate below what type of sessions you would be interested in accessing:

Group sessions **□**

1 : 1 mentoring **□**

We are available to schedule sessions during the school times for groups and individual students. If you are reserving your space on the school booking already in place please write the name of the teacher/school staff that you’ve been referred by as well as your year group (if appropriate).

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We also run group sessions open to public every weekday afternoon between 5pm – 5.50pm. Those are optional and available in addition to the school hours sessions. Please indicate by clicking appropriate box below to let us know which session you/your child would like to attend.

**Monday, 5pm – 5.50pm □**

**Tuesday, 5pm – 5.50pm □**

**Wednesday, 5pm – 5.50pm □**

**Thursday, 5pm – 5.50pm □**

**Friday, 5pm – 5.50pm □**

All group sessions will be taking place via Zoom Video Call**.** Details will be forwarded to you upon receipt of the consent form.

Please give us details of your/your child’s medical conditions or special educational needs below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please do not hesitate to contact us on 07958 381357 or email [sweetscience1@btinternet.com](mailto:sweetscience1@btinternet.com) should you have any questions or would like to discuss your booking further.

Your sincerely

Leroy Nicholas

Sweet Science Ltd.

**Consent Form**

I/We, the parent/guardian, of the below named hereby give my consent to participate in any and all activities conducted by Sweet Science Ltd. during Sweet Science Stronger Communities Boxing 2020/21

I/We are aware of the risks and hazards inherent with physical activity and exertion.

I/We assume all risks and hazards incidental to such participation.

I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Sweet Science Ltd., the organizers, sponsors, supervisors, volunteers, and participants for any claim arising out of an injury to myself/my child. This includes any injury or death that may result while transporting myself/my child to and from activities, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. As in exposure to any individual or group physical activity there is an inherent risk of injury. Risks of participation in the Sweet Science sponsored event are minimal. However, injury can occur and include but are not limited to: abrasions, contusions, lacerations, sprains, strains, fractures, head trauma, heat stroke, myocardial infarct, and sudden death. In general, the inherent risk is less than or equal to what a child is exposed to while participating in a school supervised recess session.

I/We, the parent/guardian consent to the use of video and photographic imaging of Sweet Science Ltd. activities in while I/my child participates.

I/We, the parent/guardian understand that some Sweet Science activities may include video and/or photographic recordings. The images are to be under the exclusive ownership of Sweet Science and are used only for educational and marketing purposes as they relate to Sweet Science.

I/We, the parent/guardian understand that there is no compensation for the generated images.

I have been given an opportunity to have any questions answered to my satisfaction. I have read and understand the above.

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Parent / Guardian Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Name Date of Birth

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Participant Signature